

**FEC FORM 2**  
**STATEMENT OF CANDIDACY**

RECEIVED

1. (a) Name of Candidate (in full) GARY PETERS		2011 OCT 24 AM 11:43	
(b) Address (number and street) PO BOX 226		<input type="checkbox"/> Check if address changed	
(c) City, State and ZIP Code BLOOMFIELD HILLS MI 48303		2. Identification Number H8MI09068	
4. Party Affiliation DEMOCRATIC PARTY		3. Is This Statement <input type="checkbox"/> New (N) OR <input checked="" type="checkbox"/> Amended (A)	
5. Office Sought House		6. State & District of Candidate MI 14	

**DESIGNATION OF PRINCIPAL CAMPAIGN COMMITTEE**

7. I hereby designate the following named political committee as my Principal Campaign Committee for the 2012 election(s).  
(year of election)

**NOTE:** This designation should be filed with the appropriate office listed in the instructions.

(a) Name of Committee (in full) PETERS FOR CONGRESS	
(b) Address (number and street) PO BOX 226	
(c) City, State and ZIP Code BLOOMFIELD HILLS MI 48303	

**DESIGNATION OF OTHER AUTHORIZED COMMITTEES**

(Including Joint Fundraising Representatives)

8. I hereby authorize the following named committee, which is NOT my principal campaign committee, to receive and expend funds on behalf of my candidacy.

**NOTE:** This designation should be filed with the principal campaign committee.

(a) Name of Committee (in full) SEE ATTACHED LISTING	
(b) Address (number and street)	
(c) City, State and ZIP Code	

I certify that I have examined this Statement and to the best of my knowledge and belief it is true, correct, and complete.

Signature of Candidate GARY PETERS	Date 9/12/11
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**NOTE:** Submission of false, erroneous or incomplete information may subject the person signing this Statement to penalties of 2 U.S.C. §437g.

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**DESIGNATION OF OTHER AUTHORIZED COMMITTEES**

(Including Joint Fundraising Representatives)

2011 OCT 24 AM 11:13  
[ ADDITIONAL ]  
FEC MAIL CENTER

I hereby authorize the following named committee, which is NOT my principal campaign committee, to receive and expend funds on behalf of my candidacy.

**NOTE:** This designation should be filed with the principal campaign committee.

(a) Name of Committee (in full)

JARED POLIS VICTORY FUND

(b) Address (number and street)

PO BOX 1174

(c) City, State and ZIP Code

SPRINGFIELD

22151

**DESIGNATION OF OTHER AUTHORIZED COMMITTEES**

(Including Joint Fundraising Representatives)

[ ADDITIONAL ]

I hereby authorize the following named committee, which is NOT my principal campaign committee, to receive and expend funds on behalf of my candidacy.

**NOTE:** This designation should be filed with the principal campaign committee.

(a) Name of Committee (in full)

JARED POLIS VICTORY FUND 2012

(b) Address (number and street)

PO BOX 1174

(c) City, State and ZIP Code

SPRINGFIELD

22151

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Federal Election Commission  
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PREPARER  
(3/2005)

10/24/11  
DATE PREPARED

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